| Debtor 1 Rocky Reno Ramirez | | | | |
|-----------------------------|--------------------------|--------------------|-----------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | WESTERN DISTRICT (| OF TEXAS | |
| Case number | 19-50199 | | | |

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----------------|---|-------------|---------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 179,410.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 51,974.8 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 231,384.8 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 276,675.43 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 35.2 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 11,315.0 |
| | Your total liabilities | \$ | 288,025.71 |
| ^o ar | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 5,685.8 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 5,682.2 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal | , family, or |
| | | | |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 6,929.16

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| Fill in this information to | o identify your case: | |
|---------------------------------|---|---|
| Debtor 1 | Rocky Reno Ramirez | |
| Debtor 2 (Spouse, if filing) | | |
| United States Bankrupt | cy Court for the: WESTERN DISTRICT OF TEXAS | |
| Case number 19- | 50199 | Check if this is: |
| (If known) | | An amended filing |
| | | ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| Official Form | <u>106I</u> | MM / DD/ YYYY |
| Schodulo I: Y | Vour Income | 40/45 |

Scheaule 1: Your income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Describe Employment | | | |
|----|---|----------------------|--------------------------------------|--|
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filing spouse |
| | If you have more than one job, | Empleyment status | ■ Employed | ■ Employed |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ☐ Not employed |
| | employers. | Occupation | Forklift Driver | Server |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Fito-Lay, Inc. | NISD |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 7701 Legacy Drive Plano, TX 75024 | Payroll Department 5900 Evers road San Antonio, TX 78238 |
| | | How long employed to | nere? 02/2016 | 08/2014 |

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5,368.91 838.07 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. 1,304.07 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. \$ 6,672.98 838.07

| Debt | or 1 | Rocky Reno Ramirez | - | Cas | e number (if kn | nown) | 19-501 | 99 | |
|------|-----------------------|--|-------------|----------|-----------------|-------|--------|---------------------------|--------------------|
| | | | | | or Debtor 1 | | | ebtor 2 or ling spouse | _ |
| | Cop | by line 4 here | 4. | \$ | 6,672 | 2.98 | \$ | 838.07 | <u>7</u> |
| 5. | List | t all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 824 | .81 | \$ | 10.64 | ļ |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0 | 0.00 | \$ | 64.52 | 2 |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 333 | | \$ | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 246 | | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 212 | | \$ | 104.26 | _ |
| | 5f. | Domestic support obligations | 5f. | \$ | | 0.00 | \$ | 0.00 | _ |
| | 5g. 5h. | Union dues Other deductions. Specify: AD&D employee | 5g. 5h.+ | \$ \$ | | .61 | · · | 0.00 | |
| | 511. | Child ad & d | | \$ | |).39 | * \$ | 0.00 | _ |
| | | add emp life | _ | \$ | | 3.32 | \$ | 0.00 | |
| | | Child life | _ | \$ | | 2.08 | \$ | 0.00 | _ |
| | | TRS INS | _ | \$ | | 0.00 | \$ | 5.44 | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | — 6. | \$ | 1,640 | | \$ | 184.86 | _ |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 5,032 | | \$ | 653.21 | _ |
| 8. | | all other income regularly received: | | | | | | | <u> </u> |
| | 8a. | • • | 8a. | \$ | 0 | . 00 | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$ | | 0.00 | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | \$ | | 0.00 | \$ | 0.00 | _ |
| | 8d. | | 8d. | \$ | | 0.00 | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$ | | 0.00 | \$ | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0 | 0.00 | \$ | 0.00 | <u> </u> |
| | 8g. | Pension or retirement income | 8g. | \$ | | 0.00 | \$ | 0.00 | _ |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | - \$ | 0 | 0.00 | + \$ | 0.00 | <u> </u> |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0 | 0.00 | \$ | 0.0 | 00 |
| 10. | | culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 5,032.63 | + \$_ | 65 | 3.21 = \$ | 5,685.84 |
| 11. | Incli othe Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depen | | | | | nedule J. 11. +\$ | 0.00 |
| 12. | | d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies | | | | | | 12. \$ | 5,685.84 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | Combi | ined Ily income |
| | | No. Yes, Explain: Gross income for Debtor includes shift differential | al and | 4 O | <u> </u> | | | | |

| Fill | in this information to identify your case: | | | | | |
|------|---|---------------------------|--|-----------------|---------------------|-------------------------------|
| Deb | otor 1 Rocky Reno Ramirez | | | Che | ck if this is: | |
| | | | | | An amended filing | |
| 1 | otor 2 | | | | | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | 13 expenses as of t | the following date: |
| Unit | ted States Bankruptcy Court for the: WESTERN DIST | RICT OF TEXAS | | | MM / DD / YYYY | |
| 1 | nown) 19-50199 | _ | | | | |
| Of | fficial Form 106J | | | | | |
| S | chedule J: Your Expenses | | | | | 12/1 |
| info | as complete and accurate as possible. If two mormation. If more space is needed, attach anoth mber (if known). Answer every question. | | | | | |
| Par | t 1: Describe Your Household Is this a joint case? | | | | | |
| ١. | No. Go to line 2. | | | | | |
| | Yes. Does Debtor 2 live in a separate house | ehold? | | | | |
| | □ No | | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 1 | 06J-2, Expenses | for Separate House | hold of Deb | otor 2. | |
| 2. | Do you have dependents? ☐ No | | | | | |
| | YAS | is information for endent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | Daughter | | 12 | Yes |
| | | | Daughter | | 16 | □ No ■ Yes |
| | | | Daugittei | | | ■ Yes □ No |
| | | | Son | | 19 | ■ Yes |
| | | | | | | □ No |
| _ | | | | | _ | ☐ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes | | | | | |
| Par | t 2: Estimate Your Ongoing Monthly Expens | ses | | | | |
| exp | imate your expenses as of your bankruptcy filir penses as of a date after the bankruptcy is filed. plicable date. | ng date unless y | | | | |
| Inc | lude expenses paid for with non-cash governm | ant assistance if | vou know | | | |
| the | value of such assistance and have included it | | | | Vour ovne | 2000 |
| (Of | ficial Form 106l.) | | | | Your expe | HISES |
| 4. | The rental or home ownership expenses for y payments and any rent for the ground or lot. | our residence. Ir | nclude first mortgage | e 4. S | \$ | 1,100.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. S | \$ | 0.00 |
| | 4b. Property, homeowner's, or renter's insuran | ce | | 4b. S | · | 0.00 |
| | 4c. Home maintenance, repair, and upkeep ex | • | | 4c. \$ | · | 100.00 |
| 5. | 4d. Homeowner's association or condominium Additional mortgage payments for your reside | | mo oquity looss | 4d. \$ 5. \$ | · | 30.25 |
| J. | Additional mortgage payments for your reside | since, such as not | ne equity loans | 5. 3 | p | 0.00 |

| ebtor 1 | Rocky Reno Ramirez | Case num | ber (if known) | 19-50199 |
|---------|---|----------------|----------------|-------------------------------|
| Uti | lities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 175.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 75.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| 6d. | Other. Specify: Cell Phones & Mobile Internet | 6d. | \$ | 275.00 |
| | Cable and internet | | \$ | 125.00 |
| | Netflix | | \$ | 15.00 |
| Fo | od and housekeeping supplies | 7. | \$ | 1,200.00 |
| Ch | ildcare and children's education costs | 8. | \$ | 0.00 |
| Clo | thing, laundry, and dry cleaning | 9. | \$ | 275.00 |
| Pe | sonal care products and services | 10. | \$ | 200.00 |
| Me | dical and dental expenses | 11. | \$ | 50.00 |
| Tra | nsportation. Include gas, maintenance, bus or train fare. | | • | 450.00 |
| | not include car payments. | 12. | | 450.00 |
| | tertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 190.00 |
| | aritable contributions and religious donations | 14. | \$ | 0.00 |
| | urance. | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. | 45- | c | 0.00 |
| - | a. Life insurance | 15a. | | 0.00 |
| | . Health insurance | 15b. | · | 0.00 |
| | c. Vehicle insurance | 15c. | · | 150.00 |
| | d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| Spe | kes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: tallment or lease payments: | 16. | \$ | 0.00 |
| | a. Car payments for Vehicle 1 | 17a. | \$ | 436.98 |
| | c. Car payments for Vehicle 2 | 17b. | * | 437.00 |
| | c. Other. Specify: | 17c. | | 0.00 |
| | d. Other. Specify: | — 17d. 17d. | · | 0.00 |
| | ur payments of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| | ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| | ner payments you make to support others who do not live with you. | | \$ | 200.00 |
| Spe | ecify: Mom | 19. | | |
| Oth | ner real property expenses not included in lines 4 or 5 of this form or on School | edule I: Yo | our Income. | |
| 208 | a. Mortgages on other property | 20a. | \$ | 0.00 |
| 20k | o. Real estate taxes | 20b. | \$ | 0.00 |
| 200 | c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 200 | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 206 | e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Oth | ner: Specify: Tax Return Prep | 21. | +\$ | 8.00 |
| Ink | , paper, stationary | | +\$ | 50.00 |
| Pe | t Care (food and supplies) | | +\$ | 50.00 |
| | ircuts | | +\$ | 40.00 |
| Sc | hool Supplies | | +\$ | 50.00 |
| | | | | |
| | culate your monthly expenses | | • | F 000 00 |
| | a. Add lines 4 through 21. | | \$ | 5,682.23 |
| | b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 220 | c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 5,682.23 |
| Ca | culate your monthly net income. | | | |
| | a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 5,685.84 |
| | c. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 5,682.23 |
| 230 | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$ | 3.61 |
| | THE TESUK IS YOU THOUKING HELINCOINE. | _00. | | |
| For | you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage? | | | ease or decrease because of a |
| | No. | | | |
| 1 1 | Ves Explain here: | | | |

| Fill in this information to identify your case: | | | | | | |
|---|----------------|--------------------|-----------|--|--|--|
| Debtor 1 | Rocky Reno Ram | Rocky Reno Ramirez | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | WESTERN DISTRICT (| OF TEXAS | | | |
| Case number | 19-50199 | | | | | |
| (if known) | | | | | | |
| | | | | | | |

■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| | Sign Below | |
|---|--|---|
| D | id you pay or agree to pay someone who is NOT an att | orney to help you fill out bankruptcy forms? |
| | No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
| | Rocky Reno Ramirez Signature of Debtor 1 | X Signature of Debtor 2 |
| | Date August 16, 2019 | Date |

| Fill in this information to identify your case: | | | | | |
|---|---------------------------|------------------|-----------|--|--|
| Debtor 1 | Rocky Reno Ram | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | WESTERN DISTRICT | OF TEXAS | | |
| Case number | 19-50199 | | | | |
| () | | | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| information below. | D: Creditors who have Claims Secured by Property (C | onicial Form 106D), fill in the |
|---|--|---|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| | | |
| Creditor's Conn's HomePlus | ☐ Surrender the property. | □No |
| name: | ☐ Retain the property and redeem it. | |
| Description of Surround Sound | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's E-T Auto & Truck LLP. | ☐ Surrender the property. | □No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of 2006 Jeep Commander 103,000 | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property miles securing debt: | ☐ Retain the property and [explain]: | |
| Creditor's Rushmore Lms | ☐ Surrender the property. | □ No |
| name: | ☐ Retain the property and redeem it. | _ |
| Description of ACCES Dallage Court Com | Retain the property and enter into a | Yes |

Official Form 108

Description of

Statement of Intention for Individuals Filing Under Chapter 7

Reaffirmation Agreement.

10055 Del Lago Court San

Antonio, TX 78245 Bexar

| Debtor 1 Rocky Reno Ramirez | Case number (if known) | 19-50199 |
|---|---|---------------------------------|
| property County securing debt: | ☐ Retain the property and [explain]: | _ |
| Creditor's Rushmore Lms name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: 10055 Del Lago Court San Antonio, TX 78245 Bexar County | ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ Yes |
| Creditor's Westlake Financial Services name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: 2012 Buick Enclave 70,000 miles | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |
| Part 2: List Your Unexpired Personal Property Lease For any unexpired personal property lease that you list in the information below. Do not list real estate leases. You may assume an unexpired personal property lease | ed in Schedule G: Executory Contracts and Unexpired Unexpired leases are leases that are still in effect; the | lease period has not yet ended. |
| Describe your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: Description of leased Property: | | □ No |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Port 2: Sign Bolow | | |

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

| Deb | Debtor 1 Rocky Reno Ramirez | | Case number (if known) | 19-50199 | |
|------|-----------------------------|---------------------------------------|------------------------|----------|--|
| prop | erty th | nat is subject to an unexpired lease. | | | |
| X | /s/ R | ocky Reno Ramirez | X | | |
| | Rocky Reno Ramirez | | Signature of Debtor 2 | | |
| | Signa | ature of Debtor 1 | | | |
| | Date | August 16, 2019 | Date | | |

| Debtor 1 Rocky Reno Ramirez Debtor 2 (Spouse, if filling) United States Bankruptcy Court for the: Western District of Texas Case number (if known) 19-50199 The Means Test does not apply now because of qualified military service but it could apply later. Check if this is an amended filling Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known), if you believe that you are exempted from a presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. |
|--|
| Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Western District of Texas Case number (if known) 19-50199 19-50199 10-50199 11- There is no presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later. Check if this is an amended filing Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: |
| United States Bankruptcy Court for the: Western District of Texas Case number (if known) 19-50199 19-50199 19-50199 Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filling status? Check one only. Married and your spouse is NOT filling with you. You and your spouse are: Married and your spouse is NOT filling with you. You and your spouse are: |
| applies will be made under Chapter 7 Means Test Case number 19-50199 Interest 19-50199 |
| Case number (if known) 19-50199 |
| □ 3. The Means Test does not apply now because of qualified military service but it could apply later. □ Check if this is an amended filing Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. □ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ■ Married and your spouse is NOT filing with you. You and your spouse are: |
| Check if this is an amended filing Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: |
| Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: |
| Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file <i>Statement of Exemption from Presumption of Abuse Under § 707(b)(2)</i> (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: |
| attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: |
| ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B). |
| Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. |
| Column A Column B |
| Debtor 1 Debtor 2 or non-filing spouse |
| 2 Your gross wages salary tins horuses overtime and commissions (hefore all |
| payroll deductions). \$\$\$ |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$ |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. |
| 5. Net income from operating a business, profession, or farm |
| Debtor 1 |
| Gross receipts (before all deductions) Ordinary and necessary operating expenses -\$ 0.00 |
| —————————————————————————————————————— |
| |
| 6. Net income from rental and other real property Debtor 1 |
| Gross receipts (before all deductions) \$ 0.00 |
| Ordinary and necessary operating expenses -\$ 0.00 |

Official Form 122A-1

\$

0.00 Copy here -> \$

0.00

0.00

\$

\$

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

0.00

| | | | | Column A Debtor 1 | | Column B Debtor 2 o non-filing | |
|--|--|--|------------|-------------------|-------------|--------------------------------|------------------------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | 0.00 |
| | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: | received was a benef | it under | | | | |
| | For you\$ | 0. | 00 | | | | |
| | For your spouse \$ | | 00 | | | | |
| 9. | Pension or retirement income. Do not include any ambenefit under the Social Security Act. | ount received that wa | s a | \$ | 0.00 | \$ | 0.00 |
| 10. | Income from all other sources not listed above. Spec Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below. | ecurity Act or paymer nanity, or international separate page and p | its or | \$ | 0.00 | \$ | 0.00 |
| | | | | \$ | 0.00 | \$ | 0.00 |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | 0.00 |
| 11. | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total | | \$ | 5,942.10 | + | 987.06 | = \$ 6,929.16 |
| Part | 2: Determine Whether the Means Test Applies to | o You | | | | | Total current monthly income |
| 12. | Calculate your current monthly income for the year. | Follow these steps: | | | | | |
| | 12a. Copy your total current monthly income from line 1 | 1 | | Сору | / line 11 l | nere=> | \$6,929.16_ |
| | Multiply by 12 (the number of months in a year) | | | | | | x 12 |
| | 12b. The result is your annual income for this part of the | form | | | | 12b | s. 83,149.92 |
| 13. | Calculate the median family income that applies to y | ou. Follow these step | os: | | | | |
| | Fill in the state in which you live. | тх | | | | | |
| | Fill in the number of people in your household. | 5 | | | | | |
| | Fill in the median family income for your state and size of | of household. | | | | 13. | \$ 90,358.00 |
| To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | | | | |
| 14. | How do the lines compare? | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. Or Go to Part 3. | n the top of page 1, ch | eck box | 1, There is r | no presum | nption of abus | se. |
| | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | f page 1, check box 2 | , The pro | esumption of | abuse is | determined b | y Form 122A-2. |
| Part | 3: Sign Below | | | | | | |
| | By signing here, I declare under penalty of perjury | that the information o | n this sta | atement and i | in any atta | achments is ti | rue and correct. |
| | X /s/ Rocky Reno Ramirez | | | | | | |
| | Rocky Reno Ramirez Signature of Debtor 1 | | | | | | |
| | Date August 16, 2019 | | | | | | |
| | MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form | 122Δ - 2 | | | | | |
| | If you checked line 14a, do NOT lill out of file Form | | | | | | |

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2018 to 01/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Frito-Lay

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$34,511.52 from check dated 7/31/2018 Ending Year-to-Date Income: \$64,325.06 from check dated 12/31/2018 .

This Year:

Current Year-to-Date Income: \$5,839.08 from check dated 1/31/2019 .

Income for six-month period (Current+(Ending-Starting)): \$35,652.62.

Average Monthly Income: **\$5,942.10**

Debtor 1 Rocky Reno Ramirez Case number (if known) 19-50199

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **08/01/2018** to **01/31/2019**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **NISD** Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$7,889.36 from check dated 7/31/2018.

Ending Year-to-Date Income: \$12,743.77 from check dated 12/31/2018.

This Year:

Current Year-to-Date Income: \$1,067.97 from check dated ____1/31/2019 _.

Income for six-month period (Current+(Ending-Starting)): **\$5,922.38**.

Average Monthly Income: **\$987.06**.

United States Bankruptcy Court Western District of Texas

| In r | Rocky Reno Ramirez | | Case No. | 19-50199 |
|------|---|---|--|-------------------------------------|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSATION | ON OF ATTORNEY FO | OR DEBTOR | (S) - AMENDED |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation of | ng of the petition in bankruptcy, or | agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 1,625.00 |
| | Prior to the filing of this statement I have received. | | \$ | 1,625.00 |
| | Balance Due | | | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed comp | ensation with any other person un | lless they are memb | pers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the national control of the contro | | | |
| 5. | In return for the above-disclosed fee, I have agreed to re | ender legal service for all aspects of | of the bankruptcy c | ase, including: |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho | ement of affairs and plan which more and confirmation hearing, and reduce to market value; exempns as needed; preparation a | nay be required; any adjourned hear nption planning; | rings thereof; |
| 6. | By agreement with the debtor(s), the above-disclosed fer Representation of the debtors in any dis any other adversary proceeding. | | | es, relief from stay actions or |
| | | CERTIFICATION | | |
| this | I certify that the foregoing is a complete statement of an pankruptcy proceeding. | y agreement or arrangement for pa | ayment to me for re | epresentation of the debtor(s) in |
| | August 16, 2019 | /s/ J. Robert Vanhe | melrijck | |
| 1 | Date | J. Robert Vanheme | Irijck 24056468 | |
| | | Signature of Attorney Vanhemelrijck Law | Offices. PC | |
| | | 1100 N.W. Loop 410 | | |
| | | Suite 215 | | |
| | | San Antonio, TX 78 78213 Fax: (866) 8 | | |
| | | jrv@vanlaws.com | JU-JJE I | |
| | | Name of law firm | | |
| | | | | |